Name In Full

Mrs. J. Aikman

Certificate of Death

Town

Salisbury

County

Wicomico

Died at

MARYLAND

Date 189	Month	Day	Age	Y.	M.	D.	Native of	Occupation
	Oct.	20		66	—	—	Virginia	Painter

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | Widow ~~Widower~~ | ~~Divorced~~ | Number of children living None

Husband of
Wife

Maria E. Booth

Father's Name

Wm J. Aikman.

Mother's Name

Eliza Moore

Cause of Death — Primary

Cystitis

How long sick

Month

Immediate

Acute Mania

-Accident, ~~Suicide~~, ~~Homicide~~

Reported by

Rev. W. Todd

Address

Salisbury Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79866

Name In Full

Certificate of Death

Mary Bryan

Town

County

Died at near Parsons Burg Wicomi MARYLAND

Month Day | Y M. D. | Native of | Occupation

Date 1899 december 15th | Age 3 yrs | marion

~~Male~~ White Married ~~Widow~~ Divorced

Female ~~Colored~~ Single ~~Widower~~ Number of children living

Husband of

Wife

Father's Name Goolsbury Bryan

Mother's Name Salumarey Bryan

Cause of Death: Primary Croup — How long sick

Immediate — Accident, Suicide, Homicide

Reported by J K Farlow undertaker

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79HH

dr. Freeney
attending physician

Name In Full

Catherine Dixon

Certificate of Death

Town: Forestland County: Worcester MARYLAND

Died at

Month	Day	Y.	M.	D.	Native of	Occupation
Dec.	3	60	—	—	Virginia	Housework

Date 1899

~~Male~~ Female

White ~~Colored~~

Married ~~Single~~

~~Widow~~ Widower

Divorced —

Number of children living 2

Husband of Wife: Benjamin Dixon

Father's Name:

Mother's Name:

Cause of Death — Primary: Malarial Fever

How long sick: 10 days

Immediate: Collapse,

~~Accident, Suicide, Homicide~~

Reported by: Louis W. Morris

Address: Selbyville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 70-48

Name In Full Edward Fowler

Certificate of Death

Died at Town Salisbury County Wicomico MARYLAND

Date 1899 Month Dec Day 31 | Age Y. 29 M. - D. | Native of Md | Occupation Laborer

Male / Female | ~~White~~ / Colored | Married / Single | Widow / Widower | Divorced | Number of children living

Husband of / Wife

Father's Name Ed Fowler

Mother's Name Comfort Fowler

Cause of Death — Primary — How long sick Don't Know

Immediate Don't Know — Accident, Suicide, Homicide

Reported by Dr C Hicks

Address Salisbury Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70858

Name in Full

Certificate of Death

Joshua H. McBriety

Died at Town Salisbury County Wicomico MARYLAND

Date 1899 Month 12 Day 29 | Age Y. M. D. | Native of | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ | Number of children living 1

Husband ~~Wife~~ of Annie Maddrey

Father's Name

Mother's Name

Cause of Death { Primary 161 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by C

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79888

Name In Full, Charles McMahon

Certificate of Death

Died at Town: Salisbury County: Wicomico MARYLAND

Date 1899 Month: Dec. Day: 26

Age Y. 66 M. 1 D. 13

Native of Md.

Occupation None

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ Widow ~~Widower~~ ~~Divorced~~

Number of children living 3

Husband ~~Wife~~ of Katherine Knight

Father's Neme Andrew McMahon

Mother's Name Agnes McFall

Cause of Death: Primery: Dropsy — How long sick: Died Suddenly

Immediate: Heart Trouble

~~Accident, Suicide, Homicide~~

Reported by Geo. H. Todd

Address Salisbury Md

Must be signed by physician, if eny in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 7988R

Name In Full — Certificate of Death

George Curtis Tibbles

Died at Town: Near Salisbury — County: Wicomico — MARYLAND

Date 189 4 — Month: 12 — Day: 24 — Age: Y. 54 M. D. — Native of: Wisconsin — Occupation: Farmer

Male / ~~Female~~ — White / ~~Colored~~ — ~~Married~~ / ~~Single~~ — ~~Widow~~ / Widower — ~~Divorced~~ — Number of children living

Husband of / Wife ✓

Father's Name: Asbury Tibbles — Mother's Name: Sara. Tibbles

Cause of Death — Primary: Pulmonary tuberculosis — How long sick: 1 yr & 6 m

Immediate: Syncope — ~~Accident, Suicide, Homicide~~

Reported by: J. H. Fitzpatrick

Address: Salisbury Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70[illegible]

Name in Full

Certificate of Death

Margaret Fraden

Town

County

Died at Salisbury Wicomico MARYLAND

Date 189 9	Month Dec	Day 13	Age Y. 20,	M. 8	D. —	Native of Md.	Occupation Servant

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of —
Wife

Father's Name Stephen Fraden

Mother's Name unknown

Cause of Death		How long sick
	Primary: Sudden - found dead	unknown
	Immediate: Don't Know	~~Accident, Suicide, Homicide~~

Reported by F. M. Downes

Address Salisbury Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70888

Name In Full No. Name Truitt

Certificate of Death

Died at Town Salisbury County Wicomico. MARYLAND

Date 1899 Month Dec Day 23 | Age Y. 0 M. 6 D. 10+ | Native of Md | Occupation Child

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | Divorced ~~Number of children living~~

Husband of

Wife

Father's Name Benjamin B Truitt | Mother's ~~Name~~ Anna Truitt

Cause of Death: Primary Croup | How long sick

Immediate | Accident, Suicide, Homicide

Reported by A. C. Parker.

Address Salisbury Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79-735

Name in Full

Certificate of Death

Mrs. Elizabeth Venables

Town

Died ~~at~~ near Mardela Springs County Wicomico MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
12	11	71				

Date 189 2

~~Male~~ · Female

White ~~Colored~~

~~Married~~ Single

Widow ~~Widower~~

Divorced

Number of children living 7

~~Husband~~ Wife of Richard Venables

Father's Name

Mother's Name

Cause of Death: Primary

Immediate

161

How long sick

Accident, Suicide, Homicide

Reported by Salisbury Advertiser 12-16

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full

Certificate of Death

Wm. H. Watson

Town

County

Died at Friendland Garrett MARYLAND

Month Day | Y. M. D. | Native of | Occupation

Date 1899 12 2 | Age

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 7

Husband of

Wife

Father's Name

Mother's Name

Cause of Death { Primary Consumption | Immediate

How long sick 2 yrs

Accident, Suicide, Homicide

Reported by Courier 12-9

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70898